

## TRANSMITTAL FORM

Attorney Docket No.  
RPS920020019US1/2492PIn re the application of: **Santosh P. GAUR et al.**Confirmation No: **9652**Serial No: **10/065,826**Group Art Unit: **2162**Filed: **November 22, 2002**Examiner: **Corrielus, Jean M.**For **Method and System for Optimizing Leaf Comparisons from a Tree Search**

## ENCLOSURES (check all that apply)

|                                     |                                     |  |  |   |   |
|-------------------------------------|-------------------------------------|--|--|---|---|
| <input checked="" type="checkbox"/> | Amendment 1.312                     | <input type="checkbox"/>   | Assignment and Recordation Cover Sheet           | <input type="checkbox"/>                                    | After Allowance Communication to Group      |
| <input type="checkbox"/>            | After Final                         | <input type="checkbox"/>   | Part B-Issue Fee Transmittal                     | <input type="checkbox"/>                                    | Notice of Appeal                            |
| <input type="checkbox"/>            | Information disclosure statement    | <input type="checkbox"/>   | Letter to Draftsman                              | <input type="checkbox"/>                                    | Appeal Brief                                |
| <input type="checkbox"/>            | Substitute Form 1449                | <input type="checkbox"/>   | Drawings   | <input type="checkbox"/>                                    | Status Letter                               |
| <input type="checkbox"/>            | Reference Copies                    | <input type="checkbox"/>   | Petition   | <input type="checkbox"/>                                    | Postcard                                    |
| <input type="checkbox"/>            | Extension of Time Request *         | <input type="checkbox"/>   | Fee Address Indication Form                      | <input checked="" type="checkbox"/>                         | Other Enclosure(s) (please identify below): |
| <input type="checkbox"/>            | Express Abandonment                 | <input type="checkbox"/>   | Terminal Disclaimer                              | - Copies of Patent Application Nos. 09/545,100 & 11/353,841 |   |
| <input type="checkbox"/>            | Certified Copy of Priority Doc      | <input type="checkbox"/>   | Power of Attorney and Revocation of Prior Powers |   |   |
| <input type="checkbox"/>            | Response to Incomplete Appln        | <input type="checkbox"/>   | Change of Correspondence Address                 |   |   |
| <input type="checkbox"/>            | Response to Missing Parts           | *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to . |  |   |   |
| <input type="checkbox"/>            | Executed Declaration by Inventor(s) |  |  |   |   |

## CLAIMS

| FOR                | Claims Remaining After Amendment | Highest # of Claims Previously Paid For | Extra Claims | RATE     | FEE     |
|--------------------|----------------------------------|---|--------------|----------|---------|
| Total Claims       | 26                               | 28                                      | 0            | \$ 50.00 | \$ 0.00 |
| Independent Claims | 3                                | 5                                       | 0            | \$200.00 | \$ 0.00 |
| Total Fees         |                                  |   |              |          | \$ 0.00 |

## METHOD OF PAYMENT

|                                     |  |
|-------------------------------------|--|
| <input type="checkbox"/>            | Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.                             |
| <input type="checkbox"/>            | Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.                |
| <input checked="" type="checkbox"/> | Charge any additional fees or credit any overpayment to Deposit Account No. 50-0563 (IBM Corporation). |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|               |                                   |
|---------------|-----------------------------------|
| Attorney Name | Kelvin M. Vivian, Reg. No. 53,727 |
| Signature     |                                   |
| Date          | July 12, 2006                     |

## CERTIFICATE OF MAILING

|  |           |
|--|-----------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: <b>July 12, 2006</b> |           |
| Type or printed name   | Kym Moore |
| Signature  |           |